

**APPLICATION DATA SHEET****Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?:: No

Number of copies of CRF::

Title :: PROCESS FOR MANUFACTURING A  
MEMORY DEVICE, IN PARTICULAR A PHASE  
CHANGE MEMORY, INCLUDING A  
SILICIDATION STEP

Attorney Docket Number:: 854163.411

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 6

Small Entity?:: No

Petition included?:: No

Petition Type::

Licensed U.S. Gov't Agency::

Contract or Grant No::

Secrecy Order in Parent Appl.?:: No

**First Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Italy  
Status:: Full Capacity  
Given Name:: Fabio  
Middle Name::  
Family Name:: Pellizzer  
Name Suffix::  
City of Residence:: Follina  
State or Province of Residence::  
Country of Residence:: Italy  
Street of mailing address:: Via Peroz, 12  
City of mailing address:: Follina  
State or Province of mailing address::  
Country of mailing address:: Italy  
Postal or Zip Code of mailing address:: 31051

**Second Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Italy  
Status:: Full Capacity  
Given Name:: Roberto  
Middle Name::  
Family Name:: Bez  
Name Suffix::  
City of Residence:: Milano  
State or Province of Residence::  
Country of Residence:: Italy  
Street of mailing address:: Via Vespri Siciliani, 2

City of mailing address:: Milano  
State or Province of mailing address::  
Country of mailing address:: Italy  
Postal or Zip Code of mailing address:: 20146

**Third Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Italy  
Status:: Full Capacity  
Given Name:: Marina  
Middle Name::  
Family Name:: Tosi  
Name Suffix::  
City of Residence:: Trezzo Sull'adda  
State or Province of Residence::  
Country of Residence:: Italy  
Street of mailing address:: Via Silvio Pellico, 37/I  
City of mailing address:: Trezzo Sull'adda  
State or Province of mailing address::  
Country of mailing address:: Italy  
Postal or Zip Code of mailing address:: 20056

**Correspondence Information**

Correspondence Customer Number ::	<b>38106</b>
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**Representative Information**

Representative Customer Number::		<b>38106</b>
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**Domestic Priority Information**

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::

**Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::
Europe	03425017.5	01/15/03	Yes

**Assignee #1 Information**

Assignee name::	STMicroelectronics S.r.l.
Street of mailing address::	Via C. Olivetti, 2
City of mailing address::	Agrate Brianza
State or Province of mailing address::	
Country of mailing address::	Italy
Postal or Zip Code of mailing address::	20041

**Assign e #2 Information**

Assignee name::	OVONYX Inc.
Street of mailing address::	1090 Boeing Street
City of mailing address::	Boise
State or Province of mailing address::	ID
Country of mailing address::	US
Postal or Zip Code of mailing address::	83705